

GRANPCARE NURSING AND REHAB CENTER

517 E DIVISION ST

FOND DU LAC

54935

Phone: (920) 921-6800

Operated from 1/1 To 12/31 Days of Operation: 366

Operate in Conjunction with Hospital? No

Number of Beds Set Up and Staffed (12/31/04): 75

Total Licensed Bed Capacity (12/31/04): 75

Number of Residents on 12/31/04: 39

Ownership:

Highest Level License:

Operate in Conjunction with CBRF?

Title 18 (Medicare) Certified? Yes

Title 19 (Medicaid) Certified? No

Average Daily Census: 40

Corporation

Skilled

No

Yes

No

40

Services Provided to Non-Residents		Age, Gender, and Primary Diagnosis of Residents (12/31/04)				Length of Stay (12/31/04)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		43.6
Supp. Home Care-Personal Care	No					1 - 4 Years		51.3
Supp. Home Care-Household Services	No	Developmental Disabilities	0.0	Under 65	2.6	More Than 4 Years		5.1
Day Services	No	Mental Illness (Org./Psy)	41.0	65 - 74	2.6			-----
Respite Care	No	Mental Illness (Other)	10.3	75 - 84	20.5			100.0
Adult Day Care	No	Alcohol & Other Drug Abuse	0.0	85 - 94	51.3	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	0.0	95 & Over	23.1	Full-Time Equivalent		
Congregate Meals	No	Cancer	0.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	0.0		100.0	(12/31/04)		
Other Meals	No	Cardiovascular	5.1	65 & Over	97.4	-----		
Transportation	No	Cerebrovascular	12.8		-----	RNs		8.9
Referral Service	No	Diabetes	7.7	Gender	%	LPNs		12.1
Other Services	No	Respiratory	2.6		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	20.5	Male	25.6	Aides, & Orderlies		
Mentally Ill	No		-----	Female	74.4			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

		Medicare (Title 18)			Medicaid (Title 19)			Other			Private Pay			Family Care			Managed Care				
Level of Care	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	No.	%	Per Diem (\$)	Total Resi- dents	% Of All	
Int. Skilled Care	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Skilled Care	11	100.0	310	0	0.0	0	0	0.0	0	1	3.8	125	0	0.0	0	0	0.0	0	12	30.8	
Intermediate	---	---	---	0	0.0	0	0	0.0	0	7	26.9	115	0	0.0	0	0	0.0	0	7	17.9	
Limited Care	---	---	---	0	0.0	0	0	0.0	0	13	50.0	95	1	50.0	62	0	0.0	0	14	35.9	
Personal Care	---	---	---	---	---	---	0	0.0	0	2	7.7	85	0	0.0	0	0	0.0	0	2	5.1	
Residential Care	---	---	---	---	---	---	0	0.0	0	3	11.5	85	1	50.0	55	0	0.0	0	4	10.3	
Dev. Disabled	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	
Total	11	100.0		0	0.0		0	0.0		26	100.0		2	100.0		0	0.0		39	100.0	

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/04				
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Percent Admissions from:		Activities of	%	% Needing Assistance of	% Totally	Total
		Daily Living (ADL)	Independent	One Or Two Staff	Dependent	Number of Residents
Private Home/No Home Health	13.4	Bathing	0.0	74.4	25.6	39
Private Home/With Home Health	2.4	Dressing	10.3	84.6	5.1	39
Other Nursing Homes	11.0	Transferring	20.5	74.4	5.1	39
Acute Care Hospitals	68.3	Toilet Use	17.9	74.4	7.7	39
Psych. Hosp.-MR/DD Facilities	0.0	Eating	33.3	66.7	0.0	39
Rehabilitation Hospitals	0.0	*****				
Other Locations	4.9	Continence		%	Special Treatments	%
Total Number of Admissions	82	Indwelling Or External Catheter	5.1		Receiving Respiratory Care	12.8
Percent Discharges To:		Occ/Freq. Incontinent of Bladder	51.3		Receiving Tracheostomy Care	0.0
Private Home/No Home Health	18.3	Occ/Freq. Incontinent of Bowel	23.1		Receiving Suctioning	0.0
Private Home/With Home Health	30.5	Mobility			Receiving Ostomy Care	2.6
Other Nursing Homes	4.9	Physically Restrained	0.0		Receiving Tube Feeding	2.6
Acute Care Hospitals	17.1				Receiving Mechanically Altered Diets	17.9
Psych. Hosp.-MR/DD Facilities	0.0	Skin Care			Other Resident Characteristics	
Rehabilitation Hospitals	0.0	With Pressure Sores	12.8		Have Advance Directives	87.2
Other Locations	6.1	With Rashes	15.4		Medications	
Deaths	23.2				Receiving Psychoactive Drugs	69.2
Total Number of Discharges						
(Including Deaths)	82					

Selected Statistics: This Facility Compared to All Similar Urban Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Proprietary Peer Group %	Ratio	Bed Size: 50-99 Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	53.3	84.2	0.63	88.5	0.60	87.7	0.61	88.8	0.60
Current Residents from In-County	89.7	76.9	1.17	72.5	1.24	70.1	1.28	77.4	1.16
Admissions from In-County, Still Residing	17.1	19.0	0.90	19.6	0.87	21.3	0.80	19.4	0.88
Admissions/Average Daily Census	205.0	161.6	1.27	144.1	1.42	116.7	1.76	146.5	1.40
Discharges/Average Daily Census	205.0	161.5	1.27	142.5	1.44	117.9	1.74	148.0	1.39
Discharges To Private Residence/Average Daily Census	100.0	70.9	1.41	59.0	1.70	49.0	2.04	66.9	1.49
Residents Receiving Skilled Care	30.8	95.5	0.32	95.0	0.32	93.5	0.33	89.9	0.34
Residents Aged 65 and Older	97.4	93.5	1.04	94.5	1.03	92.7	1.05	87.9	1.11
Title 19 (Medicaid) Funded Residents	0.0	65.3	0.00	66.3	0.00	68.9	0.00	66.1	0.00
Private Pay Funded Residents	66.7	18.2	3.67	20.8	3.21	19.5	3.42	20.6	3.24
Developmentally Disabled Residents	0.0	0.5	0.00	0.4	0.00	0.5	0.00	6.0	0.00
Mentally Ill Residents	51.3	28.5	1.80	32.3	1.59	36.0	1.42	33.6	1.53
General Medical Service Residents	20.5	28.9	0.71	25.9	0.79	25.3	0.81	21.1	0.97
Impaired ADL (Mean)	47.2	48.8	0.97	49.7	0.95	48.1	0.98	49.4	0.95
Psychological Problems	69.2	59.8	1.16	60.4	1.15	61.7	1.12	57.7	1.20
Nursing Care Required (Mean)	8.0	6.5	1.24	6.5	1.24	7.2	1.11	7.4	1.08